



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E458834**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input checked="" type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

CASE #	15-2234	
LOCAL AGENCY CODING	0664	
TOTAL # OF UNITS	02	OBJECT STRUCK

TRIBAL RESERVATION	
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M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 09 - 04 - 2015	1819	31		0664
		N S	E W	IN OF <input checked="" type="checkbox"/>

ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>	BLOCK NO. <input checked="" type="checkbox"/>	507
SR 9 NE	MILE POST <input type="checkbox"/>	

DISTANCE	OF (REFERENCE OR CROSS STREET)
50 00 MILES <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> W	4TH ST NE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE
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LAST NAME	UNKNOWN	FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS	
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CITY		ST		ZIP	
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	STATE	SEX U	D.O.B. MMDDYYYY		
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 9	RESTR. 9	EJECT 9	HELMET USE 9	INJURY CLASS 0	NATURE OF INJURIES
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LICENSE PLATE #	ACK4049	STATE WA	VIN#	1FAPP55U63G278191
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR 2003	MAKE FORD	MODEL TAURUS	STYLE P4	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **MIRANDA FLOYD 1604 SPRINGWATER AVE WENATCHEE WA 98801**

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE D: 4253506168
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LAST NAME	RIES	FIRST NAME	HALEY	MIDDLE INITIAL	E
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STREET NEW ADDRESS	5913 106TH PL NE
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CITY	MARYSVILLE	ST	WA	ZIP	982702092
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	RIES*HE027JB	STATE WA	SEX F	D.O.B. MMDDYYYY	04 - 02 - 1998
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 9	RESTR. 9	EJECT 9	HELMET USE 9	INJURY CLASS 0	NATURE OF INJURIES
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LICENSE PLATE #	AHH4300	STATE WA	VIN#	KNDJT2A67C7410056
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR 2012	MAKE KIA	MODEL SOUL	STYLE UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. **JEFFREY RIES 17212 ENGBRETSSEN RD GRANITE FALLS WA 98252**

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY # STATE FARM 174 1239-A30-47
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	BADGE OR ID #	AGENCY
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KERRY BERNHARD	120	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E458834**

CASE # **15-2234**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES

NARRATIVE

On 9/4/2015 at approximately 1819 hours, I responded to a report of a hit and run colision involving an unoccupied parked car a the McDonald's located at 507 SR 9 NE in the City of Lake Stevens.

Upon arrival, I spoke with the owner of a parked green Kia Soul bearing Washington AHH4300. The vehicle had been unoccupied legally parked in the parking lot. According to the owner, a red Ford Taurus bearing Washington ACK4049 backed into her parked car. The driver of the Taurus did not stop or make any attempt to notify the owner of the Kia.

There was no visible damage to the Kia or evidence of a colision.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

KERRY BERNHARD

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

09-06-15 01:51 AM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

9/6/2015 5:29:15 AM

BADGE OR ID #	120	ORI #	WA0311900	TIME POLICE DISPATCHED	6:19 PM	TIME POLICE ARRIVED	6:31 PM
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Not Observed

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-2234

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Ries, Haley Elizabeth	RACE White	ETH Amer.	SEX F	DOB 4/2/98	AGE 17	HGT 5'7"	WGT 160	HAIR Brn	EYES Brn
STREET ADDRESS 5913 106th Pl NE		CITY Marysville			STATE WA	ZIP 98270	RES. STATUS			
HOME PHONE 360-651-1211		CELL PHONE 425-350-6168			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS h.ries98@gmail.com								

I, Haley Ries, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

My cousin and I were sitting eating in McDonalds when she saw out the window that a red car backed in my car, and she saw the car move. I ran outside, and yelled to the drivers "did you just hit my car?" They made eye contact with me and drove away. A few people in the parking lot helped me identify the car as a red Ford Taurus with the license plate # ACK4049. There is no visible damage to my car. Two of my witnesses were Katie Murphy (253-327-4030) and Dominique Glowaski (425-923-4028).

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Haley Ries</u>	DATE SIGNED 9-4-15	LOCATION SIGNED Lake Stevens, WA
OFFICER/NUMBER: <u>K. BERNHARD #120</u>	DATE SIGNED 9/4/15	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE EVIDENCE UNIT				Primary Officer/Badge Number <i>R. BELMONT #170</i>		Case Number <i>15-2234</i>	
Type of Crime: Felony / Misdemeanor (Circle)				Type of Case: <i>COLLISION</i>		Date/Time: <i>7/8/15 0405</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING				*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfgk will be held for 60 days or 60 days past owner notification			

Case # *15-2234*

Item # <i>KS-1</i>	Item <i>PHOTO CD</i> Brand Name				Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Action # <i>3</i>						
Owner's Name <i>ESPD</i> Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions <i>#170</i>						
Item #	Item Brand Name				Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item #	Item Brand Name				Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item #	Item Brand Name				Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						
Item #	Item Brand Name				Storage Location	Disposition
	Brand/Model/Caliber (Further Description)					
	Serial #	Where Found	Weight of Narcotic			
Action #						
Owner's Name Address City State Zip Phone #					Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions						

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

Incident History for: #SS15017951

Case Numbers: \$SS15002234

Entered 09/04/15 18:19:18 BY SPCT06 SP0391

Dispatched 09/04/15 18:19:39 BY SPSC40 SP0274

Enroute 09/04/15 18:19:39

Onscene 09/04/15 18:31:43

Closed 09/04/15 18:50:34

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 507 SR 9 NE , LKS — MCDONALDS , LKS btwn MARKET PL & ENT TO FRONTIER VI (V)

Loc Info:

Name: RIES, HALEY

Addr:

Phone: 4253506168

/1819 (SP0391) ENTRY , AC, 2 AGO, HR , NON INJ, RUN VEH RED FORD TAURU
S L/ACK4049 LSH SB THRU PKLOT
/1819 (SP0274) AGCADV , BOLO
/1819 DISPER 19N1 #SS120 BERNHARD, OFFICER (KERRY)
/1819 (*****) REMINQ 19N1 ACK4049
/1819 (SP0274) REMINQ 19N1 LIC, 19N1, ACK4049, , ,
/1820 (SP0391) SUPP NAM: RIES, HALEY,
PHO: 4253506168,
TXT: RPS VEH WAS UNNOCUPED AT TIME OF COL , RP W
AITING NEXT TO GRN KIA SOL IN PKLOT
TXT: CORRECTION, *CC*
/1821 SUPP
/1831 (SS120) *ONSCNE 19N1
/1840 *ASNCAS 19N1 \$SS15002234
/1850 *CLEAR 19N1 D/H
/1850 CLOSE 19N1